



SCHOOL FACILITY FEE DOWN PAYMENT ASSISTANCE PROGRAM APPLICATION PACKAGE

Thank you for your inquiry about the School Facility Fee Down Payment Assistance Program available for newly constructed homes in California.

This application package includes:

Pages

1-5 • A description of the two programs applicable for single family homes constructed under a building permit issued on or after January 1, 2002.

You may select and apply for only one of the programs for which you and the property are eligible. Under certain circumstances you may be eligible to apply for each of the programs, but should attempt to select the program which offers you the most benefit.

- Application form and instructions. The form allows for two applicants. An additional Application has been provided, if needed. Detach the forms you need from this booklet.
 - A checklist of information and items needed along with the application.
- 12-15 IRS Form 4506 (Use for Program #2 only). Detach the forms you need from this booklet.

Please be sure that all forms are filled out completely and all the documents needed with the original application are collected and sent in one complete package. Incomplete packages cannot be processed. You may get help in this process from the Builder/Developer who built the home you are buying, the lender who is processing your mortgage loan, or the escrow or title company handling your escrow. Detach the forms you need from this booklet and send them together with supporting documents to the address below.

Send the completed package to: California Housing Finance Agency

School Facility Fee Down Payment Assistance Program

Overnight delivery: 500 Capitol Mall, Suite 400

Sacramento, CA 95814

Regular Mail: P. O. Box 4034 MS 920

Sacramento, CA 95812-4034

Eligible applications are reviewed on a "first come, first served" basis. Once the completed application package has been reviewed, a decision on your eligibility and confirmation of the amount of down payment assistance will be mailed to you at the address on your application. Down payment assistance funds will be credited to your escrow account once a Lien Agreement, provided to the lender listed on your application, is executed and returned to our office.

If you have any questions about the program or this application package, you may call the School Facility Fee Down Payment Assistance Office toll free at 877.9.CalHFA (877.922.5432) or 916.326.8062

DOWN PAYMENT ASSISTANCE FOR BUYERS OF NEW HOMES



School Facility Fee Down Payment Assistance Program

PROGRAM #1 Economically Distressed Area

PROGRAM #2 First-time Homebuyer Moderate Income Limits

If you are purchasing a newly constructed home in California and the building permit for that home was issued after January 1, 2002, you may be entitled to direct down payment assistance. This down payment assistance will come from a partial or full rebate of the local school facility fees paid by the builder when your new home building permit was obtained. Assistance may be used for Down Payment, Closing Costs, or any costs associated with buyer's first mortgage loan, subject to acceptance by the mortgage lender and mortgage insurer.

This program may be used along with other down payment assistance programs.

This down payment assistance will be credited to your escrow account once a Lien Agreement, provided to the lender listed on your application, is executed and returned to our office. Once escrow closes, you will no longer be eligible to apply for or receive assistance.

There are two programs that may qualify you to receive this assistance.

Please read on . . .

PROGRAM #1-- ECONOMICALLY DISTRESSED AREA

Your new home must be located in one of the counties listed below. This list of counties is subject to change annually, based on rates of unemployment.

Eligible properties include new single family detached homes, town homes and condominium units. Two- to four-unit buildings are excluded. The sales price of the home may not exceed 175% of the average median sales price of homes over the previous five years. (See below for the maximum sales price limits.)

The amount of the down payment assistance will be calculated using a portion of the eligible fees paid as shown in the formula below. If your home is a condominium or other attached unit and the building permit is not issued to individual units, but rather to the building as a whole, the amount of down payment assistance would be apportioned to your unit based on the square footage in the unit as a portion of the larger building.

Assistance may be used for Down Payment, Closing Costs, or any costs associated with buyer's first mortgage loan, subject to acceptance by the mortgage lender and mortgage insurer.

You must agree to occupy your new home for five years. If owner-occupied for less than five years, you must repay a pro rata share of the down payment assistance based on the number of months of your occupancy. A Lien Agreement is recorded on the property showing this requirement.

Program #1 -- Requirements and Assistance Formula

- County on eligible list for current year
- Application -- original
- Building Permit dated on or after January 1, 2002
- School District Certificate of Compliance/ Receipt for fees paid
- Sales Contract signed by buyer and seller showing sales price does not exceed county maximum
- Assistance amount calculation worksheet: Total of fees approved under Government Code 65995, .5 and .7 (obtain from school district) _(A) Less Government Code 65995 Subdivision(b)Fees A minus B equals

Amount of Assistance

EXAMPLE (Figures used for illustration only):

Total of Fees approved under Government Code 65995, .5 and .7

\$4,950 (A)

Less Government Code 65995 Subdivision (b) Fees \$1,930 (B)

A minus B equals

\$ 3,020 Amount of Assistance

(NOTE: In this program only a portion of the fees paid are eligible.)

Economically Distressed Counties and Respective Maximum Sales Price Limits -- Program #1

This list of counties is subject to change annually, based on rates of unemployment in each county.

County	Sales Price Limits	County	Sales Price Limits
Fresno	\$523,425	San Joaquin	\$426,600
Imperial	\$449,750	Shasta	\$575,173
Kern	\$495,600	Stanislaus	\$659,575
Kings	\$485,975	Tulare	\$464,275
Merced	\$549,588		

PROGRAM #2 -- FIRST-TIME HOMEBUYER - MODERATE INCOME LIMITS

You must be a low or moderate income first-time homebuyer purchasing a new home anywhere in California. (See enclosed income limits)

If you have not owned a home which has been your principal residence for the previous three years (as evidenced by copies of your income tax returns), and your income does not exceed the income limits for moderate income, adjusted for family size as listed on Page 5, you would be eligible under this Program.

Eligible properties include new single family detached homes, town homes and condominium units located anywhere in California. Two- to four-unit buildings are excluded.

The amount of the down payment assistance will be calculated by using all of the eligible fees paid as shown in the formula below. If your home is a condominium or other attached unit and the building permit is not issued to individual units, but rather to the building as a whole, the amount of down payment assistance would be apportioned to your unit based on the square footage in the unit as a portion of the larger building.

Assistance may be used for Down Payment, Closing Costs, or any costs associated with buyer's first mortgage loan, subject to acceptance by the mortgage lender and mortgage insurer.

You must agree to occupy your new home for five years. If owner-occupied for less than five years, you must repay a pro rata share of the down payment assistance based on the number of months of your occupancy. A Lien Agreement is recorded on the property showing this requirement.

Program #2 -- Requirements and Assistance Formula

- No ownership interest in a primary residence in the last three years and within moderate income limits
- Application -- original
- Building Permit dated on or after January 1, 2002
- School District Certificate of Compliance/ Receipt for fees paid
- Current income verification or pay stubs identifying Employer and Employee
- W-2s -- most current year
- 1040 Tax Returns for last three years
- IRS Form 4506 (See Page 13)
- Sales Contract signed by buyer and seller
- Assistance amount calculation worksheet: Total of Fees approved under any or all of Government Code 65995
 Subsection (b), 65995.5 and/or .7 (obtain from school district) equals

\$ Amount of Assistance

EXAMPLE (Figures used for illustration only):

Total of Fees approved under any or all of Government Code 65995 Subsection (b), 65995.5 and/or .7

\$ 2,000 (A) 65995. Subsection (b)

\$ 316 (B) 65995.5

\$ 0 (C) 65995.7

A plus B plus C equals

\$2,316 Amount of Assistance

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Program #2 First-Time Homebuyer, Moderate Income Limits As of July 13, 2010 NUMBER OF PERSONS IN FAMILY

	•		·		,	•		
COUNTY	1	2	3	4	5	6	7	8
ALAMEDA	\$75,850	\$86,700	\$97,500	\$108,350	\$117,000	\$125,700	\$134,350	\$143,000
ALPINE	\$56,550	\$64,600	\$72,700	\$80,750	\$87,200	\$93,650	\$100,150	\$106,600
AMADOR	\$57,050	\$65,200	\$73,350	\$81,500	\$88,000	\$94,550	\$101,050	\$107,600
BUTTE	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
CALAVERAS	\$54,100	\$61,850	\$69,550	\$77,300	\$83,500	\$89,650	\$95,850	\$102,050
COLUSA	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
CONTRA COSTA	\$75,850	\$86,700	\$97,500	\$108,350	\$117,000	\$125,700	\$134,350	\$143,000
DEL NORTE	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
EL DORADO	\$61,400	\$70,150	\$78,950	\$87,700	\$94,700	\$101,750	\$108,750	\$115,750
FRESNO	\$47,300	\$54,050	\$60,800	\$67,700	\$72,950	\$78,350	\$83,750	\$89,150
GLENN	\$47,300 \$47,300	\$54,050 \$54,050	\$60,800	\$67,550 \$67,550	\$72,950 \$72,950	\$78,350 \$78,350	\$83,750	\$89,150
					\$72,950 \$72,950	. ,	. ,	
HUMBOLDT	\$47,300	\$54,050	\$60,800	\$67,550		\$78,350	\$83,750	\$89,150
IMPERIAL	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
INYO	\$50,600	\$57,800	\$65,050	\$72,250	\$78,050	\$83,800	\$89,600	\$95,350
KERN	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
KINGS	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
LAKE	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
LASSEN	\$48,800	\$55,750	\$62,750	\$69,700	\$75,300	\$80,850	\$86,450	\$92,000
LOS ANGELES	\$52,900	\$60,500	\$68,050	\$75,600	\$81,650	\$87,700	\$93,750	\$99,800
MADERA	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
MARIN	\$83,500	\$95,450	\$107,350	\$119,300	\$128,850	\$138,400	\$147,950	\$157,500
MARIPOSA	\$47,950	\$54,800	\$61,650	\$68,500	\$74,000	\$79,450	\$84,950	\$90,400
MENDOCINO	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
MERCED	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
MODOC	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
MONO	\$56,750	\$64,900	\$73,000	\$81,100	\$87,600	\$94,100	\$100,550	\$107,050
MONTEREY	\$55,500	\$63,450	\$71,350	\$79,300	\$85,650	\$92,000	\$98,350	\$104,700
NAPA	\$68,700	\$78,500	\$88,350	\$98,150	\$106,000	\$113,850	\$121,700	\$129,550
NEVADA	\$58,150	\$66,450	\$74,750	\$83,050	\$89,700	\$96,350	\$103,000	\$109,650
ORANGE	\$73,250	\$83,700	\$94,200	\$104,650	\$113,000	\$121,400	\$129,750	\$138,150
PLACER	\$61,400	\$70,150	\$78,950	\$87,700	\$94,700	\$101,750	\$108,750	\$115,750
PLUMAS	\$52,100	\$59,500	\$66,950	\$74,400	\$80,350	\$86,300	\$92,250	\$98,200
RIVERSIDE	\$54,600	\$62,400	\$70,200	\$78,000	\$84,250	\$90,500	\$96,700	\$102,950
SACRAMENTO	\$61,400	\$70,150	\$70,200 \$78,950	\$87,700	\$94,700	\$90,500 \$101,750	\$108,750	\$102,930
SAN BENITO	\$68,100	\$70,150	\$87,550	\$97,700	\$105,100	\$101,750	\$120,650	\$113,750
SAN BERNARDINO	\$54,600	\$62,400	\$70,200	\$78,000	\$84,250	\$90,500	\$96,700	\$102,950
SAN DIEGO	\$63,400	\$72,500	\$81,550	\$90,600	\$97,850	\$105,100	\$112,350	\$119,600
SAN FRANCISCO	\$83,500	\$95,450	\$107,350	\$119,300	\$128,850	\$138,400	\$147,950	\$157,500
SAN JOAQUIN	\$53,000	\$60,550	\$68,150	\$75,700	\$81,750	\$87,800	\$93,850	\$99,900
SAN LUIS OBISPO	\$60,900	\$69,600	\$78,300	\$87,000	\$93,950	\$100,900	\$107,900	\$114,850
SAN MATEO	\$83,500	\$95,450	\$107,350	\$119,300	\$128,850	\$138,400	\$147,950	\$157,500
SANTA BARBARA	\$60,000	\$68,550	\$77,150	\$85,700	\$92,550	\$99,400	\$106,250	\$113,100
SANTA CLARA	\$86,950	\$99,350	\$111,800	\$124,200	\$134,150	\$144,050	\$154,000	\$163,950
SANTA CRUZ	\$70,750	\$80,850	\$90,950	\$101,050	\$109,150	\$117,200	\$125,300	\$133,400
SHASTA	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
SIERRA	\$48,250	\$55,100	\$62,000	\$68,900	\$74,400	\$79,900	\$85,450	\$90,950
SISKIYOU	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
SOLANO	\$66,550	\$76,050	\$85,550	\$95,050	\$102,650	\$110,250	\$117,850	\$125,450
SONOMA	\$67,550	\$77,200	\$86,850	\$96,500	\$104,200	\$111,950	\$119,650	\$127,400
STANISLAUS	\$50,000	\$57,100	\$64,250	\$71,400	\$77,100	\$82,800	\$88,550	\$94,250
SUTTER	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
TEHAMA	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
TRINITY	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
TULARE	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150
TUOLUMNE	\$50,150	\$54,030 \$57,300	\$64,500	\$71,650	\$77,400	\$83,100	\$88,850	\$94,600
	\$50,150 \$72,850		. ,					. ,
VENTURA	. ,	\$83,250	\$93,650	\$104,050	\$112,350	\$120,700	\$129,000	\$137,350
YOLO	\$60,900	\$69,600	\$78,300	\$87,000	\$93,950 \$73,050	\$100,900	\$107,900	\$114,850
YUBA	\$47,300	\$54,050	\$60,800	\$67,550	\$72,950	\$78,350	\$83,750	\$89,150

Instructions for Completing the Application for the School Facility Fee Down Payment Assistance Program

(NOTE: All sections must be completed.)

APPLICATION INSTRUCTIONS:

Section A

You should be able to get help to determine the Assistance Program you can apply for and the amount of Assistance you are eligible for from your builder or developer. You can also use the calculation guide on the Application Checklist (see Page 11). Check the box for only one of the two Programs and enter the dollar amount requested.

Section B

Print or type your name, social security number (SSN), current mailing address and telephone number in the spaces provided for both you and the co-purchaser.

Complete the Questionnaire for each purchaser listed beside each name.

Use a separate Application Form for additional purchasers of the same property and attach it to your application.

Enter the number of people who will be living in the property being purchased.

Enter the gross annual income for yourself and also for any co-purchaser.

Optional: Review the information dealing with race and ethnicity. Enter the information you choose by checking the box for both the purchaser and any co-purchaser.



APPLICATION SCHOOL FACILITY FEE DOWN PAYMENT ASSISTANCE PROGRAM Section A **Assistance Program Applied for:** #1 Economically Distressed Area #2 First-Time Moderate Income Homebuyer **Amount of Assistance Requested:** Questionnaire Yes No **Purchaser Information** Section B Purchaser: **Purchaser's Name** SSN Do you intend to occupy the property as your primary residence? Have you had ownership interest in a **Present Mailing Address** property in the last three years? If yes, did you occupy the property? Is this person now serving, or has this person ever served City Zip on active duty in the U.S. Armed Forces, Military Reserves, Phone Numbers or National Guard? Home □Yes □No Decline to Report Co-Purchaser: Co-Purchaser's Name SSN Do you intend to occupy the property as your primary residence? **Present Mailing Address** Have you had ownership interest in a property in the last three years? If yes, did you occupy the property? City Zip Is this person now serving, or has this person ever served on active duty in the U.S. Armed Forces, Military Reserves, Phone Numbers or National Guard? Home □Yes □No ☐Decline to Report **Occupants** Total number of persons who will occupy the purchased property **Purchaser** Income Total Gross Annual Income Co-Purchaser Income Total Gross Annual Income Race, National Origin & Ethnicity: The following information is requested by the Federal Government for certain types of transactions related to a dwelling in order to monitor the Agency's compliance with fair housing laws. You are not required to furnish this information, but are encouraged to do so. The law provides that an Agency may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, the Agency will note race and sex on the basis of visual observation or surname. If you do not wish to furnish this information, please check the box below. Purchaser □ I do not wish to furnish this information □ American Indian or Alaskan Native □ Black or African American □ White □ Hispanic or Latino ☐ Asian Indian ☐ Laotian ☐ Cambodian ☐ Other Asian: Chinese ☐ Japanese ☐ Korean ☐ Vietnamese Native Hawaiian or Other Pacific Islander: Hawaiian Guamanian Samoan ☐ Filipino ☐ Other Co-Purchaser 🗖 I do not wish to furnish this information 🗖 American Indian or Alaskan Native 🗖 Black or African American 🗖 White 🗖 Hispanic or Latino ☐ Korean ☐ Vietnamese ☐ Asian Indian ☐ Laotian ☐ Cambodian ☐ Other ☐ Japanese ☐ Samoan ☐ Other Filipino App Rev 04/2009

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Instructions for Completing the Application for the School Facility Fee Down Payment Assistance Program

Application Instructions continued:

Section C

Enter the Sales Price from your Sales Purchase Contract.

Type of Property: Check the box that represents the type of property you are purchasing and enter the square foot size of the home. This figure may be obtained from the sales purchase contract, appraisal or builder/developer plans.

Property Address: Print or type the exact address of the property being purchased, including the county in which the property is located.

Provide the names and addresses of the builder/developer, lender, self-help agency (if applicable), and title/escrow company.

School District(s): Enter the name of one or more School Districts participating in the School Facility Fee Down Payment Assistance Program.

Section D

All Purchaser/Applicants are to read the applicant declaration and acknowledgement, and then sign and date the application. Applications must be submitted with Original Signatures.

Section E

The builder/developer, escrow/title company or lender who is processing your purchase loan application must verify the original documents you use to prove your identity. The builder/developer, escrow/title company or lender must sign the verification in **Section E** of this application.

What to Send With this Original Application:

Detach the forms you need from this booklet and send them together with supporting documents to the address below. There is a Checklist on Page 11 for each of the two Down Payment Assistance Programs. Please review it carefully and send the documentation required for the Program you choose along with your application. Your lender or the builder/developer should be able to assist you in providing this information.

Where to Send the Original Application and Supporting Documentation:

California Housing Finance Agency

School Facility Fee Down Payment Assistance Program

Overnight delivery: 500 Capitol Mall, Suite 400

Sacramento, CA 95814

Regular Mail: P. O. Box 4034 MS 920

Sacramento, CA 95812-4034



	Purchase Price \$Address of Property Being Purchased:	☐ Condominium	☐ Detached Home	Size:	_ Square Fee
	Street City State Builder/Developer Phone: (FAX: () Contact Name: Company:	Zip	County Lender Phone: (FAX: (Email: Contact Name: Company:)	
	Address:		Address:		
			City		
	City Sta Title/Escrow Company Phone: (Email:	•	Self-Help Agency Pho	State one: () X: ()	Zip
	Escrow Officer:	Escrow#	Contact Name:	, ,	
	Company:		Company:		
	Address:		Address:		
	City Sta	te Zip	City	State	Zip
Section D	Acknowledgement and Agreeme The undersigned acknowledges th minimum of five years, the Down F Facility Fee Down Payment Assist	ent at if the purchased prope Payment Assistance fund	rty is not occupied by the	e original purch	the School
Section D	Acknowledgement and Agreeme The undersigned acknowledges th minimum of five years, the Down F	ent at if the purchased properations and if the purchased properations and the Calient assistance is applicables and programate the programate and programate is applicables and programate and programate is applicables.	rty is not occupied by the s must be repaid on a pro fornia Housing Finance A e on a one-time basis on m. The undersigned also	e original purcha o-rated basis to Agency. The und ly for the purcha o certify that the	the School dersigned ac aser and that
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Application Checklist School Facility Fee Down Payment Assistance Program Choose only one for which you are eligible

PROGRAM #1 **Economically Distressed Area**

Newly Constructed Home

	County on Eligible List for Current Year (Page 2) Application original Building Permit dated on or after
	•
	January 1, 2002 (obtain from the builder) School District Certificate of Compliance/receipt for payment (obtain from the builder)
	Sales Contract signed by the buyer and seller show
	ing sales price does not exceed county maximum.
П	Assistance Amount Calculation:
	(see example below) Total of Fees Approved under Government Code
	65995, 65995.5 & 65995.7
	\$(A)
	Less Government Code 65995 Subdivision (b) Fee
	\$(B)
	A minus B equals
	A minus D cquais
	\$ Amount of Assistance
	\$ Amount of Assistance Note: In this Program only a portion of the
	\$ Amount of Assistance Note: In this Program only a portion of the fees paid are eligible.
	\$Amount of Assistance Note: In this Program only a portion of the fees paid are eligible. Example: Total of Fees Approved under Government Code 65995, 65995.5 & 65995.7 \$_4,950(A) Less Government Code 65995 Subdivision (b) Fees
	\$ Amount of Assistance Note: In this Program only a portion of the fees paid are eligible. Example: Total of Fees Approved under Government Code 65995, 65995.5 & 65995.7 \$_4,950 (A) Less Government Code 65995 Subdivision (b)
	\$Amount of Assistance Note: In this Program only a portion of the fees paid are eligible. Example: Total of Fees Approved under Government Code 65995, 65995.5 & 65995.7 \$_4,950(A) Less Government Code 65995 Subdivision (b) Fees

PROGRAM #2 First-time Homebuyer - Moderate Income Limits

	Newly Constructed Home
	No Ownership Interest in a Primary Residence in
_	the last three years
_	Application original
ш	Building Permit dated on or after January 1, 2002 (obtain from the builder)
П	School District Certificate of Compliance/receipt
_	for payment (obtain from the builder)
	Sales Contract signed by buyer and seller
	Current income verification (i.e., current paystubs
	identifying employer and employee, Profit and
	Loss Statement or Lender Verification of
_	Employment)
	W-2s most current year
	1040 Tax Returns for last three years
	IRS Form 4506 (See Page 13)
H	Income is within Program limits (see Page 5) Assistance Amount Calculation:
ш	(see example below)
	Total of Fees Approved under any
	or all of Government Code 65995 Sub-section (b),
	65995.5 and/or 65995.7 equals
	\$ Amount of Assistance
	Example:
	Total of Fees Approved under any or all of Gov-

ernment Code 65995 Subsection (b) 65995.5 and/or 65995.7

\$2,000 (A) 65995. Subsection (b)

\$<u>316</u> (B) 65995.5

\$____0 (C) 65995.7

A plus B plus C equals

\$2,316 Amount of Assistance

[Intentionally left blank]



Form **4506**

(Rev. January 2010)

Department of the Treasury Internal Revenue Service

Request for Copy of Tax Return

▶ Request may be rejected if the form is incomplete or illegible.

Tip. You may be able to get your tax return or return information from other sources. If you had your tax return completed by a paid preparer, they should be able to provide you a copy of the return. The IRS can provide a **Tax Return Transcript** for many returns free of charge. The transcript

OMB No. 1545-0429

1a Nar	me shown on tax return. If a joint return, enter the name shown first.		ty number on tax return or eation number (see instructions)
		, , , , , , , , , , , , , , , , , , , ,	,
2a If a	a joint return, enter spouse's name shown on tax return.	2b Second social sec	curity number if joint tax return
3 Curi	rent name, address (including apt., room, or suite no.), city, state, and	d ZIP code	
4 Prev	vious address shown on the last return filed if different from line 3		
5 If the	ne tax return is to be mailed to a third party (such as a mortgage com nber. The IRS has no control over what the third party does with the t	pany), enter the third party's name, ad tax return.	Idress, and telephone
	If the tax return is being mailed to a third party, ensure that you have d in these lines. Completing these steps helps to protect your privacy.		g. Sign and date the form once you
so de ty	ax return requested. Form 1040, 1120, 941, etc. and all atta chedules, or amended returns. Copies of Forms 1040, 1040A, and estroyed by law. Other returns may be available for a longer peri/pe of return, you must complete another Form 4506. ►	d 1040EZ are generally available for od of time. Enter only one return nu	7 years from filing before they are umber. If you need more than one
N	lote. If the copies must be certified for court or administrative procee	dings, check here	
_			
be	ee. There is a \$57 fee for each return requested. Full payment mus e rejected. Make your check or money order payable to "United nd "Form 4506 request" on your check or money order.	•	r EIN
	Cost for each return		\$ 57.00
	lumber of returns requested on line 7		
	otal cost. Multiply line 8a by line 8b		
Signature return req matters p	e of taxpayer(s). I declare that I am either the taxpayer whose natiquested. If the request applies to a joint return, either husband or partner, executor, receiver, administrator, trustee, or party othe 60 on behalf of the taxpayer. Note. For tax returns being sent to a thin	me is shown on line 1a or 2a, or a p wife must sign. If signed by a corpo er than the taxpayer, I certify that	person authorized to obtain the tax orate officer, partner, guardian, tax I have the authority to execute
			elephone number of taxpayer on ne 1a or 2a
	Signature (see instructions)	Date	
Sign Here	Title (if line 1a above is a corporation, partnership, estate, or trust)		
) -		
	Spouse's signature acy Act and Paperwork Reduction Act Notice, see page 2.	Date Cat. No. 41721E	Form 4506 (Rev. 1-2010)



Form 4506 (Rev. 1-2010) Page 2

General Instructions

Section references are to the Internal Revenue Code.

Purpose of form. Use Form 4506 to request a copy of your tax return. You can also designate a third party to receive the tax return. See line 5.

How long will it take? It may take up to 60 calendar days for us to process your request.

Tip. Use Form 4506-T, Request for Transcript of Tax Return, to request tax return transcripts, tax account information, W-2 information, 1099 information, verification of non-filing, and record of account.

Automated transcript request. You can call 1-800-829-1040 to order a transcript through the automated self-help system. Follow prompts for "questions about your tax account" to order a tax return transcript.

Where to file. Attach payment and mail Form 4506 to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual returns (Form 1040 series) and one for all other

If you are requesting a return for more than one year and the chart below shows two different RAIVS teams, send your request to the team based on the address of your most recent return.

Chart for individual returns

(Form 1040 series)			
If you filed an individual return and lived in:	Mail to the "Internal Revenue Service" at:		
Florida, Georgia, North Carolina, South Carolina	RAIVS Team P.O. Box 47-421 Stop 91 Doraville, GA 30362		
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, or A.P.O. or F.P.O. address	RAIVS Team Stop 6716 AUSC Austin, TX 73301		
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	RAIVS Team Stop 37106 Fresno, CA 93888		
Arkansas, Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, Missouri New	RAIVS Team Stop 6705 P-6		

Kansas City, MO

64999

Missouri, New

Rhode Island,

Vermont, Virginia, West Virginia

Hampshire, New

Jersey, New York, Ohio, Pennsylvania,

Chart for all other returns

If you lived in Mail to the or your business was in:

"Internal Revenue Service" at: Alabama, Alaska,

Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota. Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota. Tennessee, Texas, Utah, Washington, Wyoming, a foreign country, or A.P.O. or F.P.O. address

RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409

Connecticut, Delaware. District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Vermont, Virginia, West Virginia, Wisconsin

RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati. OH 45250

Specific Instructions

Line 1b. Enter your employer identification number (EIN) if you are requesting a copy of a business return. Otherwise, enter the first social security number (SSN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

Signature and date. Form 4506 must be signed and dated by the taxpayer listed on line 1a or 2a. If you completed line 5 requesting the return be sent to a third party, the IRS must receive Form 4506 within 120 days of the date signed by the taxpayer or it will be rejected.

Individuals. Copies of jointly filed tax returns may be furnished to either spouse. Only one signature is required. Sign Form 4506 exactly as your name appeared on the original return. If you changed your name, also sign your current name.

Corporations. Generally, Form 4506 can be signed by: (1) an officer having legal authority to bind the corporation, (2) any person designated by the board of directors or other governing body, or (3) any officer or employee on written request by any principal officer and attested to by the secretary or other officer.

Partnerships. Generally, Form 4506 can be signed by any person who was a member of the partnership during any part of the tax period requested on line 7.

All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpaver.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the Letters Testamentary authorizing an individual to act

Signature by a representative. A representative can sign Form 4506 for a taxpayer only if this authority has been specifically delegated to the representative on Form 2848, line 5. Form 2848 showing the delegation must be attached to Form 4506.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to establish your right to gain access to the requested return(s) under the Internal Revenue Code. We need this information to properly identify the return(s) and respond to your request. Sections 6103 and 6109 require you to provide this information, including your SSN or EIN, to process your request. If you do not provide this information, we may not be able to process your request. Providing false or fraudulent information may subject you to penalties

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, and the District of Columbia for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file Form 4506 will vary depending on individual circumstances. The estimated average time is: Learning about the law or the form, 10 min.; Preparing the form, 16 min.; and Copying, assembling, and sending the form to the IRS, 20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506 simpler, we would be happy to hear from you. You can write to Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP. 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Do not send the form to this address. Instead, see Where to file on this page.



Form 4506

(Rev. January 2010)

Department of the Treasury Internal Revenue Service

Request for Copy of Tax Return

▶ Request may be rejected if the form is incomplete or illegible.

OMB No. 1545-0429

should provide	ou may be able to get your tax return or return information from other be able to provide you a copy of the return. The IRS can provide es most of the line entries from the original tax return and usually es. See Form 4506-T, Request for Transcript of Tax Return, or you	a Tax Return Transcript for many recontains the information that a third p	returns free of charge. The transcript party (such as a mortgage company)
1a	Name shown on tax return. If a joint return, enter the name shown firs		urity number on tax return or fication number (see instructions)
2a	If a joint return, enter spouse's name shown on tax return.	2b Second social s	ecurity number if joint tax return
3 (Current name, address (including apt., room, or suite no.), city, state,	and ZIP code	
4 F	Previous address shown on the last return filed if different from line 3		
5 li	If the tax return is to be mailed to a third party (such as a mortgage conumber. The IRS has no control over what the third party does with the	mpany), enter the third party's name, e tax return.	address, and telephone
	on. If the tax return is being mailed to a third party, ensure that you havilled in these lines. Completing these steps helps to protect your private	•	ng. Sign and date the form once you
6	Tax return requested. Form 1040, 1120, 941, etc. and all a schedules, or amended returns. Copies of Forms 1040, 1040A, a destroyed by law. Other returns may be available for a longer p type of return, you must complete another Form 4506. ► Note. If the copies must be certified for court or administrative process.	nd 1040EZ are generally available for eriod of time. Enter only one return	r 7 years from filing before they are number. If you need more than one
7	Year or period requested. Enter the ending date of the year or periods, you must attach another Form 4506.	od, using the mm/dd/yyyy format. If yo	ou are requesting more than
8	Fee. There is a \$57 fee for each return requested. Full payment m be rejected. Make your check or money order payable to "Unite and "Form 4506 request" on your check or money order.	•	or EIN
а	Cost for each return		\$ 57.00
b	Number of returns requested on line 7		
c	Total cost. Multiply line 8a by line 8b		\$
return matter	If we cannot find the tax return, we will refund the fee. If the refund sture of taxpayer(s). I declare that I am either the taxpayer whose requested. If the request applies to a joint return, either husband is partner, executor, receiver, administrator, trustee, or party of 4506 on behalf of the taxpayer. Note. For tax returns being sent to a the	name is shown on line 1a or 2a, or a or wife must sign. If signed by a cor her than the taxpayer, I certify tha	person authorized to obtain the tax porate officer, partner, guardian, tax at I have the authority to execute within 120 days of signature date. Telephone number of taxpayer on
	Signature (see instructions)	Date	line 1a or 2a
Sign	y Signature (see instructions)	Date	
Here	Title (if line 1a above is a corporation, partnership, estate, or trust)		
	Spouse's signature	Date	
For Pr	rivacy Act and Paperwork Reduction Act Notice, see page 2.	Cat. No. 41721E	Form 4506 (Rev. 1-2010)



Form 4506 (Rev. 1-2010) Page **2**

General Instructions

Section references are to the Internal Revenue Code.

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Tip. Use Form 4506-T, Request for Transcript of Tax Return, to request tax return transcripts, tax account information, W-2 information, 1099 information, verification of non-filing, and record of account.

Automated transcript request. You can call 1-800-829-1040 to order a transcript through the automated self-help system. Follow prompts for "questions about your tax account" to order a tax return transcript.

Where to file. Attach payment and mail Form 4506 to the address below for the state you lived in, or the state your business was in, when that return was filed. There are two address charts: one for individual returns (Form 1040 series) and one for all other returns.

If you are requesting a return for more than one year and the chart below shows two different RAIVS teams, send your request to the team based on the address of your most recent return

Chart for individual returns (Form 1040 series)

(Form 1040 series)				
If you filed an individual return and lived in:	Mail to the "Internal Revenue Service" at:			
Florida, Georgia, North Carolina, South Carolina	RAIVS Team P.O. Box 47-421 Stop 91 Doraville, GA 30362			
Alabama, Kentucky, Louisiana, Mississippi, Tennessee, Texas, a foreign country, or A.P.O. or F.P.O. address	RAIVS Team Stop 6716 AUSC Austin, TX 73301			
Alaska, Arizona, California, Colorado, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Utah, Washington, Wisconsin, Wyoming	RAIVS Team Stop 37106 Fresno, CA 93888			
Arkansas, Connecticut, Delaware, District of Columbia, Maine,				

RAIVS Team

64999

Stop 6705 P-6

Kansas City, MO

Maryland,

Massachusetts,

Hampshire, New

Jersey, New York,

Vermont, Virginia, West Virginia

Ohio, Pennsylvania,

Missouri, New

Rhode Island,

Chart for all other returns

If you lived in Mail to the or your business "Internal Revenue was in: Service" at:

Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota. Oklahoma, Oregon, South Dakota, Tennessee, Texas, Utah, Washington, Wyoming, a foreign country, or A.P.O. or F.P.O. address

RAIVS Team P.O. Box 9941 Mail Stop 6734 Ogden, UT 84409

Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts. Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio. Pennsylvania. Rhode Island, South Carolina, Vermont, Virginia, West Virginia, Wisconsin

RAIVS Team P.O. Box 145500 Stop 2800 F Cincinnati, OH 45250

Specific Instructions

Line 1b. Enter your employer identification number (EIN) if you are requesting a copy of a business return. Otherwise, enter the first social security number (SSN) shown on the return. For example, if you are requesting Form 1040 that includes Schedule C (Form 1040), enter your SSN.

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All others. See section 6103(e) if the taxpayer has died, is insolvent, is a dissolved corporation, or if a trustee, guardian, executor, receiver, or administrator is acting for the taxpayer.

Documentation. For entities other than individuals, you must attach the authorization document. For example, this could be the letter from the principal officer authorizing an employee of the corporation or the Letters Testamentary authorizing an individual to act for an estate.

Signature by a representative. A representative can sign Form 4506 for a taxpayer only if this authority has been specifically delegated to the representative on Form 2848, line 5. Form 2848 showing the delegation must be attached to Form 4506.

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Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and cities, states, and the District of Columbia for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

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If you have comments concerning the accuracy of these time estimates or suggestions for making Form 4506 simpler, we would be happy to hear from you. You can write to Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Do not send the form to this address. Instead, see Where to file on this page.

PLEASE BE SURE TO COMPLETE AND MAIL ALL DOCUMENTS LISTED ON THE CHECKLIST (PAGE 11) AS PART OF YOUR ORIGINAL APPLICATION PACKAGE

If you have any questions about completing the application, please contact us at:

SCHOOL FACILITY FEE DOWN PAYMENT ASSISTANCE PROGRAM
California Housing Finance Agency
500 Capitol Mall, Suite 400, Sacramento, CA 95814

Mailing address
P. O. Box 4034 MS 920, Sacramento, CA 95812-4034
Toll Free 877.9.CalHFA (877.922.5432)
or
(916) 326-8062
assistance@calhfa.ca.gov



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